

EXHIBIT
18

Hampton Sheriff's Office

Application for Extra Duty Assignments

Prior to engaging in any secondary Business or Employment, a member or employee shall submit through the proper Chain of Command one (1) copy of this application for permission for secondary employment.

Employee's Name: SANDHOFFER, JOHN C. Effective Date: 17 JUL 09

Employee's Date of Employment: 04 FEB 09 Expiration Date: _____

Extra Duty Assignment

Working For: ☒ HSO ☐ HPD ☐ HSO and HPD

Specify Duties: PROVIDING ADDITIONAL SECURITY / CROWD CONTROL AT HAMPTON UNIV.

Date(s) Required Training Completed: HO EXTRA DUTY (3/09) OC/CS (7/09) ASP (9/08)
FIREARMS QUALIFICATION 98 (4/30/08)

Verified by: Sgt MEYERS / [Signature] #36

Last Evaluation Rating: ABOVE AVE Evaluation Date: 02/04/09

Policy #132 Reviewed: [Signature] 17 JUL 09
(Signature of Applicant) (Date)

Total hours weekly: 10-15 hrs

Approval

<u>[Signature]</u> (Immediate Supervisor Signature)	<u>8-24-09</u> (Date)	<input checked="" type="checkbox"/> Approve <input type="checkbox"/> Disapproved
<u>[Signature] #15</u> (Shift Lieutenant Signature)	<u>8/24/09</u> (Date)	<input checked="" type="checkbox"/> Approve <input type="checkbox"/> Disapproved
<u>[Signature] #10</u> (Jail Administrator/Court Services Commander)	<u>8/24/09</u> (Date)	<input checked="" type="checkbox"/> Approve <input type="checkbox"/> Disapproved
<u>[Signature]</u> (Sheriff/Designee Signature)	<u>9/2/09</u> (Date)	<input checked="" type="checkbox"/> Approve <input type="checkbox"/> Disapproved

Hampton Sheriff's Office

Application for Extra Duty Assignments

Prior to engaging in any secondary Business or Employment, a member or employee shall submit through the proper Chain of Command one (1) copy of this application for permission for secondary employment.

Employee's Name: DEP. JOHN SANDITOFEL #69 Effective Date: 15 JUL 09

Employee's Date of Employment: 04 FEB 08

Official Use Only:

Expiration Date: _____

Extra Duty Assignment

Working For: ☒ HSO HAMPTON UNIVERSITY

Specify Duties: SECURITY FOR SPECIAL EVENTS

Date(s) Required Training Completed: EXTRA DUTY (3/09) ASP (09/08) FIREARMS (4/09)

Verified by: SLT MEYERS (TRAINING SUPV)

Last Evaluation Rating: ABOVE AVERAGE Evaluation Date: 04 FEB 09

Policy #132 Reviewed: DEP. [Signature] #69 15 JUL 09
(Signature of Applicant) (Date)

Total hours weekly: VARIABLE

Approval

[Signature] 7/16/09
(Immediate Supervisor Signature) (Date)

☒ Approve ☐ Disapproved

[Signature] 10 JUL 09
(Shift Lieutenant Signature) (Date)

☒ Approve ☐ Disapproved

[Signature] 7/16/09
(Commander/Designee Signature) (Date)

☒ Approve ☐ Disapproved

[Signature] 7/20/09
(Sheriff/Designee Signature) (Date)

☒ Approve ☐ Disapproved

Hampton Sheriff's Office

Application for Extra Duty Assignments

Prior to engaging in any secondary Business or Employment, a member or employee shall submit through the proper Chain of Command one (1) copy of this application for permission for secondary employment.

Employee's Name: DIXON, DAVID W. Effective Date: 9/2/04

Employee's Date of Employment: JUNE 1996 Expiration Date: _____

Extra Duty Assignment

Working For: ☐ HSO ☐ HPD ☒ HSO and HPD

Specify Duties: SECURITY

Date(s) Required Training Completed: 1/4/00

Verified by: Lt. McSee #15

Last Evaluation Rating: above average Evaluation Date: 12/2003

Policy #132 Reviewed: David Dixon 08-30-04
(Signature of Applicant) (Date)

Total hours weekly: Various

Approval

N/A

(Immediate Supervisor Signature) (Date)

Robert McSee #15 9/2/04

(Shift Lieutenant Signature) (Date)

E. [Signature] #8 9/2/04

(Jail Administrator/Court Services Commander) (Date)

[Signature] 9/24/04
(Sheriff/Designee Signature) (Date)

☐ Approve ☐ Disapproved

☒ Approve ☐ Disapproved

☒ Approve ☐ Disapproved

☒ Approve ☐ Disapproved

Hampton Sheriff's Office

Application for Secondary Employment

Prior to engaging in any secondary Business or Employment, a member or employee shall submit through the proper Chain of Command one (1) copy of this application for permission for secondary employment.

Employee's Name: Dixon, David W Effective Date: 05-28-02

Date of Employment: 06/24/96 Expiration Date: _____

Secondary Employer

Name of Employer: Hampton University

Address of Employer: _____

Nature of Business: College

Specify Duties : Security

Total hours weekly: approx. 10

Approval

☒ Approve

[Signature]
(Chain Commander Signature)

☐ Disapproved

5-28-02
(Date)

☒ Approve

[Signature]
(Jail Administrator/Court Services Supervisor)

☐ Disapproved

5-29-02
(Date)

☒ Approve

[Signature]
(Sheriff Signature)

☐ Disapproved

6-7-02
(Date)

Hampton Sheriff's Office

Application for Secondary Employment

Prior to engaging in any secondary Business or Employment, a member or employee shall submit through the proper Chain of Command one (1) copy of this application for permission for secondary employment.

Employee's Name: Dixon, David W. Effective Date: 05-28-02

Date of Employment: 06/24/96 Expiration Date: _____

Secondary Employer

Name of Employer: Coburn Downs

Address of Employer: _____

Nature of Business: off track betting

Specify Duties : Security

Total hours weekly: approx 7

Approval

☒ Approve

[Signature]
(Chief Commander/Signatory)

☐ Disapproved

5-28-02
(Date)

☒ Approve

[Signature]
(Jail Administrator/Court Services Supervisor)

☐ Disapproved

5-29-02
(Date)

☒ Approve

[Signature]
(Sheriff Signature)

☐ Disapproved

6-7-02
(Date)

Hampton Sheriff's Office

Application for Secondary Employment

Prior to engaging in any secondary Business or Employment, a member or employee shall submit through the proper Chain of Command one (1) copy of this application for permission for secondary employment.

Employee's Name: DAVID W. DIXON Effective Date: 9 JAN 98

Date of Employment: 9 JAN 98 Expiration Date: _____

Secondary Employer

Name of Employer: COLONIAL DOWNS

Address of Employer: 1909 COMMERCE DRIVE

Nature of Business: SECURITY

Specify Duties : _____

Total hours weekly: 8 hrs

Approval

☐ Approve

H. K. Red
(Shift Commander Signature)

☐ Disapproved

(Date)

☒ Approve

James E. Bender, Major
(Jail Administrator/Court Services Supervisor)

☐ Disapproved

2/25/98
(Date)

☐ Approve

[Signature]
(Sheriff Signature)

☐ Disapproved

(Date)

Hampton Sheriff's Office

Application for Extra Duty Assignments

Prior to engaging in any secondary Business or Employment, a member or employee shall submit through the proper Chain of Command one (1) copy of this application for permission for secondary employment.

Employee's Name: Robert W. McCoy Effective Date: 8-24-04

Employee's Date of Employment: 8-15-88 Expiration Date: _____

Extra Duty Assignment

Working For: ☐ HSO ☐ HPD ☒ HSO and HPD

Specify Duties: Security

Date(s) Required Training Completed: 12/9/02

Verified by: H. McSee #15

Last Evaluation Rating: above average Evaluation Date: 12/2003

Policy #132 Reviewed: [Signature] 8-24-04
(Signature of Applicant) (Date)

Total hours weekly: Various

Approval

N/A

(Immediate Supervisor Signature)

(Date)

[Signature] #15

8/24/04

(Shift/Lieutenant Signature)

(Date)

[Signature] #8

9/2/04

(Unit Administrator/Court Services Commander)

(Date)

[Signature] 9/24/04

(Sheriff/Designee Signature)

(Date)

☐ Approve ☐ Disapproved

☒ Approve ☐ Disapproved

☒ Approve ☐ Disapproved

☒ Approve ☐ Disapproved

Hampton Sheriff's Office

Application for Secondary Employment

Prior to engaging in any secondary Business or Employment, a member or employee shall submit through the proper Chain of Command one (1) copy of this application for permission for secondary employment.

Employee's Name: R.W. McCoy Effective Date: 12-6-02
Date of Employment: AUGUST 15, 1988 Expiration Date: N/A

Secondary Employer

Name of Employer: Hampton Sheriff's Office / HPD
Address of Employer: 1928 W. PEMBROKE AVE
Nature of Business: Extra Duty For HMT. SHERIFF'S OFFICE
Specify Duties : SECURITY / EXTENT DUTY
Total hours weekly: UNKNOWN

Approval

☒ Approve

[Signature] 15
(Shift Commander Signature)

☐ Disapproved

12-9-02
(Date)

☒ Approve

[Signature]
(Jail Administrator/Court Services Supervisor)

☐ Disapproved

12-9-02
(Date)

☒ Approve

[Signature]
(Sheriff Signature)

☐ Disapproved

12-13-02
(Date)

Hampton Sheriff's Office

Application for Secondary Employment

Prior to engaging in any secondary Business or Employment, a member or employee shall submit through the proper Chain of Command one (1) copy of this application for permission for secondary employment.

Employee's Name: R.W. McCoy

Effective Date: April 11, 2002

Date of Employment: 8-15-88

Expiration Date: _____

Secondary Employer

Name of Employer: Alternatives, INC. (YCOPE)

Address of Employer: _____

Nature of Business: Instructing youth of the Myths of Alcohol & Marijuana usage.

Specify Duties : Instructing

Total hours weekly: 2-4

Approval

☒ Approve

[Signature]
(Shift Commander Signature)

☐ Disapproved

5-28-02
(Date)

☒ Approve

[Signature] #8
(Jail Administrator/Court Services Supervisor)

☐ Disapproved

5-29-02
(Date)

☒ Approve

[Signature]
(Sheriff Signature)

☐ Disapproved

6-7-02
(Date)

Hampton Sheriff's Office

Application for Extra Duty Assignments

Prior to engaging in any secondary Business or Employment, a member or employee shall submit through the proper Chain of Command one (1) copy of this application for permission for secondary employment.

Employee's Name: DANIEL RAY CARTER JR Effective Date: 10-17-06

Employee's Date of Employment: 06-15-98 Expiration Date: INDEFINITE

Extra Duty Assignment

Working For: ☒ HSO ☐ HPD ☐ HSO and HPD

Specify Duties: SECURITY

Date(s) Required Training Completed: 9-25-06 9-26-06 9-29-06

Verified by: Capt. McLean #10 10-27-06

Last Evaluation Rating: ABOVE AVERAGE Evaluation Date: 12-05

Policy #132 Reviewed: Dep. DL Carter #139 10-17-06
(Signature of Applicant) (Date)

Total hours weekly: 12

Approval

Sgt. J. Hale #36 OCT 17 2006
(Immediate Supervisor Signature) (Date)

[Signature] 17 OCTOBER 2006
(Shift Lieutenant Signature) (Date)

[Signature] 10/27/06
(Jail Administrator/Court Services Commander) (Date)

[Signature] 11-2-06
(Sheriff/Designee Signature) (Date)

☒ Approve ☐ Disapproved

☒ Approve ☐ Disapproved

☒ Approve ☐ Disapproved

☒ Approve ☐ Disapproved

Hampton Sheriff's Office

Application for Secondary Employment

Prior to engaging in any secondary Business or Employment, a member or employee shall submit through the proper Chain of Command one (1) copy of this application for permission for secondary employment.

Employee's Name: DEP DR CARTER

Effective Date: 3-04-02

Date of Employment: 6-15-98

Expiration Date: N/A

Secondary Employer

Name of Employer: COL. DOWNS / HAMPTON UNIV.

Address of Employer: N/A

Nature of Business: EXTRA DUTY

Specify Duties : SECURITY

Total hours weekly: N/A

Approval

☒ Approve

[Signature]
(Shift Commander Signature)

☐ Disapproved

3-4-02
(Date)

☒ Approve

[Signature]
(Jail Administrator/Court Services Supervisor)

☐ Disapproved

3-4-02
(Date)

☒ Approve

[Signature]
(Sheriff Signature)

☐ Disapproved

3/6/02
(Date)